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Managara	Sework Reduction Act of 1995	no persons	Application Number	10/684,00		unless it	displays a valid OMB control number.					
TRANSMITTAL FORM			Filing Date 10/10/03		3							
			First Named Inventor	Wheatley	Wheatley							
			Art Unit	1772								
to be used for all correspondence after initial filing)			Examiner Name	Ahmad, N	Ahmad, Nasser							
Total Number of Pages in This Submission 16			Attorney Docket Number	T9475.NP	T9475.NP.DIV							
ENCLOSURES (Check all that apply)												
✓ Fee Trans	mittal Form		Orawing(s)			After A	Allowance Communication to TC					
✓ Fe	e Attached	. 🗀	icensing-related Papers		Appeal Communication to B of Appeals and Interference							
Amendment/Reply F			Petition				Il Communication to TC					
☐ Aff				Petition to Convert to a Provisional Application			etary Information					
			Power of Attorney, Revocat Change of Correspondence	同	Status	Letter						
Affidavits/declaration(s)			erminal Disclaimer		Other	Enclosure(s) (please Identify						
Extension of time request				1—	below erminal): Disclaimers						
Express A				, ,			nts Under 37 CFR 3.73 (b)					
Information Disclosure Statement			CD, Number of CD(s)									
·	45.1.11		Landscape Table on CD									
Certified Copy of Priority Document(s) Remar		Reman	ks									
	lissing Parts/											
Re	e Application ply to Missing Parts											
LJ un	der 37 CFR 1.52 or 1.53											
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Firm Name	SIGNA	TURE U	F APPLICANT, ATT	URNET, C	JR AG	ENI						
Signature	Signature 2 2											
Printed name CARROW M HOBSON												
Date 11/15/85				Reg. No.	41	لرده						
CERTIFICATE OF TRANSMISSION/MAILING												
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Typed or printed n	ame Garron M. Hobso	on	-			Date	11-15-05					

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PTO/SB/17 (12-04v2)
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Fees pursuant to the Consolid	oted Appropri		18181 L	Complete II Known								
	_	Application Number 10/6		/684,008								
FEE TR		Filing Date 10		0/10/03								
Fo		First Named Inventor W		Vheatley								
Applicant claims small		Examiner Name		Ahmad, Nasser								
		Art Unit		1772								
TOTAL AMOUNT OF PAY	MENT (\$) 130.00		Attorney Docket No. T9475.N								
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
Deposit Account Deposit Account Number: 20-0100 Deposit Account Name: Thorpe North & Western												
For the above-identi				•	•							
Charge fee(s)	indicated b	elow		Charge	fee(s) indi	cated below.	except for the filing fee					
Under 37 CFR 1.16 and 1.17 WARNING: Information and authorization on PTO-2038.												
FEE CALCULATION												
1. BASIC FILING, SEAR			EES									
	FILING	FEES Small Entity	SEARC	CH FEES		ATION FEE						
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)					
Utility	300	150	500	250	200	100	****					
Design	200	100	100	50	130	65						
Plant	200	100	300	150	160	80						
Reissue	300	150	500	250	600	300	****					
Provisional	200	100	0	0	0	0						
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Small Entity Fee (\$) 50 25												
Each independent cla		(including Reissue			200	100						
Multiple dependent cl Total Claims		F (\$)	F 1	Deid (ê)		360	180					
- 20 or HP =	Extra Clair	<u>ms</u> <u>Fee (\$)</u> x	<u> </u>	Paid (\$)		Fee (\$)	Dependent Claims Fee Paid (\$)					
HP = highest number of total		or, if greater than 20.										
<u>Indep. Claims</u> 3 or HP =	Extra Clair	<u>ns</u> <u>Fee (\$)</u> x	<u> </u>	Paid (\$)								
HP = highest number of indep			ın 3.									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer												
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)												
- 100 =		/ 50 =		(round up to a wh	nole numbe	er) x	=					
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)												
Other (e.g., late filing surcharge): Terminal Disclaimer Fees (\$65 x 2) \$130.00												
SUBMITTED BY	7											
Registration No. (Attorney/Agent) 41,073 Telephone (801) 566-6633												
Name (Print/Type) Garron M.			11-15-05									

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